None



Attended in Street Stre

[] Yes

[] No

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <a href="NOVEL REPLICATION DEFICIENT ADENOVIRUS VECTORS AND METHODS FOR MAKING AND USING THEM">NOVEL REPLICATION DEFICIENT ADENOVIRUS VECTORS AND METHODS FOR MAKING AND USING THEM</a>, the specification of which:

[X]	is attached hereto.			
D	was filed on as Applicat	ion Serial No and was a	mended on	•
Ō	was described and claimed	l in PCT International Ap	olication No.	filed on
	and a	s amended under PCT Art	icle 19 on	·
	eby state that I have review claims, as amended by any		ntents of the above-identified pove.	l specification,
	nowledge the duty to discless of Federal Regulations, §		to be material to patentabili	ity in accordance with
I her application(s)	•	Title 35, United States C	ode, §119(e)(1) of any Unite	ed States provisional
	U.S. Serial No.	Filing Date	Stat	us
None			<del></del>	
listed below a United States acknowledge of Federal Re	nd, insofar as the subject mapplication in the manner pathe duty to disclose all info	natter of each of the claims provided by the first paragon prmation I know to be mat pecame available between	ode, §120 of any United Stass of this application is not discrept of Title 35, United Staterial to patentability as definithe filing date of the prior appreciation.	sclosed in the prior tes Code, §112, I ted in Title 37, Code
	U.S. Serial No.	Filing Date	Stat	us
None				
application(s) country other for patent or i the United Sta	for patent or inventor's ce than the United States of A nventor's certificate or any	rtificate or of any PCT int America listed below and he PCT international applica- te on the same subject matt	nited States Code, §119 of an ernational application(s) des lave also identified below an ation(s) designating at least of er having a filing date before	ignating at least one by foreign application one country other than
Count	rv Annlica	tion No	Filing Date	Priority Claimed

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Richard J. Anderson, Reg. No. 36,732; Joseph R. Baker, Reg. No. 40,900; Ingrid Beattie, Reg. No. 42,306; Robert M. Bedgood, Reg. No. 43,488; Gregory P. Einhorn, Reg. No. 38,440; Mark S. Ellinger, Reg. No. 34,812; J.Eldora L. Ellison, Reg. No. 39, 967; Peter Fasse, Reg. No. 32,983; J. Patrick Finn, III, Reg. No. 44109; Harold Fox, Reg. No. 41,498; Janis K. Fraser, Reg. No. 34,819;



Atto s Docket No.: 11203-002001 Client's Ref. No.: UM 1750

## **Combined Declaration and Power of Attorney**

Page 2 of 2 Pages

John W. Freeman, Reg. No. 29,066; Diane L. Gardner, Reg. No. 36,518; Scott Harris, Reg. No. 32,030; John F. Hayden, Reg. No. 37,640; George Heibel, 42,648; John Land, Reg. No. 29,554; Ronald C. Lundquist, Reg. No. 37,875; Anita L. Meiklejohn, Reg. No. 35,283; Reginald Suyat, Reg. No. 28,172; Y. Rocky Tsao, Reg. No. 34,054; Hans R. Troesch, Reg. No. 36,950; John R. Wetherell, Jr., Reg. No. 31,678; Dorothy P. Whelan, Reg. No. 33,814, of FISH & RICHARDSON P.C.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor:	MICHAEL J. IMPERIALE		
Inventor's Signature:		Date:	
Residence Address:			
Citizenship:	United States		
Post Office Address:			

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	Applicant or Patentee:	Michael J. Imperiale, et al.					
	Serial or Patent No.:						
	Filed or Issued: For:	NOVEL REPLICATION DEFICIENT ADENOVIRUS VECTORS AND METHODS FOR MAKING					
		AND USING THEM					
	VER	VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(d)) — NONPROFIT ORGANIZATION					
	I hereby declare that I am	hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:					
	Name of Organization: Address of Organization	UNIVERSITY OF MICHIGAN MEDICAL SCHOOL 2715 Furstenberg, 1150 West Medical Center Drive, Ann Arbor, MI 48109-0619					
	[] Tax Exemp [] Nonprofit (Name of S	or Other Institution of Higher Education pt Under Internal Revenue Service Code (26 SC 501(a) and 501(c)(3)) Scientific or Educational Under Statute of State of the United States of America State:					
	United Sta	alify as tax exempt under Internal Revenue Service Code (26 USC 501(a) and 501(c)(3)) if located in the tes of America					
		alify as nonprofit scientific or educational under Statute of State of the United States of America if located in States of America					
1	(Name of S						
100 to 10	I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code with regard to the invention entitled NOVEL REPLICATION DEFICIENT ADENOVIRUS VECTORS AND METHODS FOR MAKING AND USING THEM by inventor(s) MICHAEL J. IMPERIALE, described in:  [X] the specification filed herewith.  [] application serial no, filed						
14,1	patent no. , i	ssued .					
-	ts under contract or law have been conveyed to and remain with the nonprofit organization with regard to the on.						
lan M	invention is listed below small business concern u	nonprofit organization are not exclusive, each individual, concern or organization having rights to the and no rights to the invention are held by any person, other than the inventor, who could not qualify as a nder 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR anization under 37 CFR 1.9(e).					
	*NOTE: Separate verific averring to their status as	ed statements are required from each named person, concern or organization having rights to the invention s small entities. (37 CFR 1.27)					
Full Name:							
	Address:	IVIDUAL [] SMALL BUSINESS CONCERN [] NONPROFIT ORGANIZATION					
	I acknowledge the duty t entity status when any ne maintenance fee due afte	to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small ew rule 53 application is filed or prior to paying, or at the time of paying, the earliest of the issue fee or any er the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))					
	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.						
	Name: MARIA SI	MARIA SIPPOLA-THIELE, PH. D., M.B.A.					
	Title: Assistant I	Director, Office of Technology Transfer and Corporate Research					
	enberg, 1150 West Medical Center Drive, Ann Arbor, MI 48109-0619						
	Signatura	Date:					